PTO/SB/05 (01-04)
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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. First Inventor Title

(Only for now morphovisional applications under 57 GFR 1.05(D))	Express Mail Label No.		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450		
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages ] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS		
- Abstract of the Disclosure			
4. Drawing(s) (35 U.S.C. 113) [Total Sheets]  5. Oath or Declaration	ion-in-part (CIP) of prior application No.:  Art Unit:  prior application, from which an oath or declaration is supplied under Box or divisional application and is hereby incorporated by reference. entity omitted from the submitted application parts.		
Customer Number:	OR L_J Correspondence address below		
Name Stephen Branett Elliott			
Address 702 By-Falo Covings Duive			
City Allan	State TEXAS Zip Code 750/3		
Country USA Te	lephone 9723968197 Fax		
Name (Print/Type) Registration No. (Attorney/Agent)			
Signature A 1 B 5 0 1 Th	Date 4 19 64		

This collection of information is required by \$7 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a velid QMB control number. Complete if Known FEE TRANSMITTAL Application Number Filing Date for FY 2004 First Named Inventor Effective 10/01/2003. Patent fees are subject to annual revision. Examiner Name Applicant claims small entity status. See 37 CFR 1.27 **Art Unit** TOTAL AMOUNT OF PAYMENT Attorney Docket No METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Check Money 3. ADDITIONAL FEES Credit card Other None Large Entity | Small Entity Deposit Account: Fee Fee **Fee Description** Deposit (\$) Code Code Fee Paid Account 1051 2051 130 65 Surcharge - late filing fee or oath Number Deposit 2052 Surcharge - late provisional filing fee or 1052 50 Account cover sheet Name 1053 130 1053 130 Non-English specification The Director is authorized to: (check all that apply) 1812 2,520 1812 2,520 For filing a request for ex parte reexamination Charge fee(s) indicated below Credit any overpayments 920\* Requesting publication of SIR prior to 1804 920 1804 Charge any additional fee(s) or any underpayment of fee(s) Examiner action Charge fee(s) indicated below, except for the filing fee 1805 1.840 1805 1.840° Requesting publication of SIR after Examiner action to the above-identified deposit account. 1251 110 2251 Extension for reply within first month **FEE CALCULATION** 210 Extension for reply within second month 1252 420 2252 1. BASIC FILING FEE 1253 950 2253 475 Extension for reply within third month arge Entity Şmall Entity Fee Paid Fee Description 1254 1,480 2254 740 Extension for reply within fourth month Code (\$) 1255 2,010 2255 1,005 Extension for reply within fifth month 1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee 1401 330 2401 165 Notice of Appeal 2402 1003 530 2003 265 1402 330 165 Filing a brief in support of an appeal Plant filing fee 145 Request for oral hearing 1004 770 2004 385 1403 290 2403 Reissue filing fee 1451 1.510 1451 1005 160 2005 Provisional filing fee 1,510 Petition to institute a public use proceeding 1452 110 2452 55 Petition to revive - unavoidable SUBTOTAL (1) (\$) 665 Petition to revive - unintentional 1453 1,330 2453 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1501 1.330 2501 665 Utility issue fee (or reissue) Fee from Extra Claims Fee Paid 1502 below 480 2502 240 Design issue fee **Total Claims** 1503 640 2503 320 Plant issue fee Independent 1460 130 1460 130 Petitions to the Commissioner Multiple Dependent 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) Large Entity Small Entity 1806 180 1806 180 Submission of Information Disclosure Stmt Fee Description 40 Recording each patent assignment per Code (\$) Code (\$) 8021 40 8021 property (times number of properties) 1202 18 2202 9 Claims in excess of 20 1809 770 2809 385 Filing a submission after final rejection 1201 86 2201 Independent claims in excess of 3 (37 ČFR 1.129(a)) 1203 290 2203 145 Multiple dependent claim, if not paid 1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b)) 1204 86 2204 \*\* Reissue independent claims

**or number previou	usly paid, if greater; For Reissues, see above	Reduced by Basic Filling Fee Falu	SUBTOTAL (3) (\$)
SUBMITTED BY			(Complete (if applicable))
Name (Print/Type)	Staphen & Silvott,	Registration No. (Attorney/Agent)	Telephone 972-396-8197
Signature	1 Al S	1	Date Apr. 19.2004

1801

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Other fee (specify)

2801

1802

385 Request for Continued Examination (RCE)

900 Request for expedited examination

of a design application

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over original patent

SUBTOTAL (2)

\*\* Reissue claims in excess of 20

(\$)

and over original patent

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